PAGE 1 / 20

Image# 202006309244224847

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM	3X	For Othe	r Than An A	Authorized	d Commi	ttee		Office U	se Only	
1. NAME OF COMMITT	: EE (in full)	TYPE OR	PRINT ▼		ample: If ty er the lines.		12FE4	·M5		
REPUBLI	CAN LEAD	ERSHIP	FOR ORE	GON						1
		L DO DOX	(241027							
ADDRESS (nur	mber and street)	PO BOX	341027							
than p	k if different previously ted. (ACC)	AUSTIN					TX	78734	4	
2. FEC IDEN	NTIFICATION N	NUMBER ▼		CITY ▲			STATE ▲		ZIP CODE	A
C co	0737361		3	3. IS THIS REPORT		NEW (N) OR		AMENDED (A)		
(Choose O	F REPORT (ne) erly Reports:		nthly port e On:	Feb 20 (M2) Mar 20 (M3) Apr 20 (M4)	Ä	May 20 (M5) Jun 20 (M6) Jul 20 (M7)		aug 20 (M8) Sep 20 (M9) Oct 20 (M10)	D (N Ye	lov 20 (M11) Ion-Election ear Only) Ion-Election Jon-Election ear Only) an 31 (YE)
	April 15 Quarterly Report	(Q1) (c)	12-Day		Primary (1			ral (12G)	-	unoff (12R)
	luly 15 Quarterly Report	(Q2)	PRE-Election Report for th		Convention		Speci	al (12S)		
	October 15 Quarterly Report	(Q3)			M M	/ D D /	YYYY	Y	in the	
	lanuary 31 /ear-End Report	(YE)	EI	lection on	L.				State of	
F Y	July 31 Mid-Year Report (Non-elect /ear Only) (MY)		30-Day POST-Election Report for the		General (3	80G)	Runo	ff (30R)	Sp	pecial (30S)
	Fermination Report TER)	rt	EI	lection on	M = M	/ D = D /	Y	Y	in the State of	
5. Covering F	Period	04 3		020	through	06	30	202	20	
I certify that I h	have examined		and to the bes	st of my kno	wledge and	d belief it is tr	ue, correct	and comple	te.	
Type or Print N	Name of Treasur		, CABLL, , ,							
Signature of Tr	reasurer HO	BBS, CABELL	, , ,		[Electronica	ally Filed]	Date 0			2020
NOTE: Submiss	sion of false, erro	neous, or inc	complete inform	nation may si	ubject the p	erson signing	this Report t	o the penalti	es of 52 U.	S.C. § 30109
Office Use									FORM Rev. 05/2016	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016) Page 2

Write or Type Committee Name

REPUBLICAN LEADERSHIP FOR OREGON

04 30 2020 06 30 2020 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 0.00 January 1, 2020 (b) Cash on Hand at 49530.50 Beginning of Reporting Period..... 207157.00 422157.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 422157.00 256687.50 6(a) and 6(c) for Column B)..... 256687.50 422157.00 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 0.00 0.00 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

For further information contact:

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

REPUBLICAN LEADERSHIP FOR OREGON

R	eport Covering the Period: From:	7 30 7 2020 To:	06 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other The Parity of Council and Counc	'	
	Than Political Committees (i) Itemized (use Schedule A)	205000.00	420000.00
	(ii) Unitemized(iii) TOTAL (add	0.00	0.00
	Lines 11(a)(i) and (ii)	205000.00	420000.00
	(b) Political Party Committees	0.00	0.00
	(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
12	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	205000.00	420000.00
12.	Party Committees	0.00	0.00
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16.	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	2157.00	2157.00
47	to Federal Candidates and Other Political Committees	0.00	0.00
	Other Federal Receipts (Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds (a) Non-Federal Account	0.00	0.00
	(from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	207157.00	422157.00
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	207157.00	422157.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Caronaa Tour to Date			
(i) Federal Share	0.00	0.00			
(ii) Non-Federal Share	0.00	0.00			
(b) Other Federal Operating	4 4				
Expenditures	47960.22	78367.72			
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	47960.22	78367.72			
Transfers to Affiliated/Other Party	0.00	0.00			
Committees Contributions to Federal Candidates/Committees	0.00	0.00			
and Other Political Committees	0.00	0.00			
Independent Expenditures (use Schedule E)	207667.00	342729.00			
Coordinated Party Expenditures (52 U.S.C. § 30116(d))	4 4				
(use Schedule F)	0.00	0.00			
Loan Repayments Made	0.00	0.00			
Loans Made	0.00	0.00			
Refunds of Contributions To: (a) Individuals/Persons Other	3.00	4 4			
Than Political Committees	0.00	0.00			
(b) Political Party Committees	0.00	0.00			
(c) Other Political Committees	200	200			
(such as PACs)(d) Total Contribution Refunds	0.00	0.00			
(add Lines 28(a), (b), and (c))▶	0.00	0.00			
Other Disbursements (Including					
Non-Federal Donations)	1060.28	1060.28			
Federal Election Activity (52 U.S.C. § 30101(2 (a) Allocated Federal Election Activity (from Schedule H6)	20))				
(i) Federal Share	0.00	0.00			
(ii) "Levin" Share	0.00	0.00			
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00			
(c) Total Federal Election Activity (add	0.00	0.00			
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00			
Total Disbursements (add Lines 21(c), 22,					
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	256687.50	422157.00			
Total Federal Disbursements					
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)					
HOITI LINE 31)	256687.50	422157.00			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	205000.00	420000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
 Net Contributions (other than loans) (subtract Line 34 from Line 33) 	205000.00	420000.00
 Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) 	47960.22	78367.72
37. Offsets to Operating Expenditures (from Line 15, page 3)	2157.00	2157.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	45803.22	76210.72

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

F	FOR LINE NUMBER:					PAGE	6	OF	20
(0	che	ck only	or	ne)					
	X	11a		11b		11c	12	!	
		13		14		15	16	;	17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

FUIL Name of Individual (Last, First, Middle Initial) or Full Organization Name A KNIGHT, PHILLP**. Mailing Address 1 SW BOWERMAN DR City SEAVERTON City State Coreupation (for Individual) Name of Employer (for Individual) CHAIRMAN EMERITUS Feccipt For: Primary Molling Address (sp39 N POWDER RIVER LN City State Cocupation (for Individual) Chairman Aggregate Year-to-Date ▼ North POWDER Name of Employer (for Individual) North POWDER Name of Employer (for Individual) City North POWDER Name of Employer (for Individual) Receipt For: Primary General Other (speedby) Tansaction 19: S411Al.4196 Amount of Each Receipt this Period Cocupation (for Individual) Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Tansaction 19: S411Al.4196 Amount of Each Receipt this Period Date of Receipt Memo Item CONTRIBUTION Date of Receipt Memo Item CONTRIBUTION Date of Receipt Memo Item CONTRIBUTION Date of Receipt Tansaction 19: S411Al.4199 Amount of Each Receipt this Period Total Code Tansaction 19: S411Al.4199 Date of Receipt Total Code Tansaction 19: S411Al.4199 Amount of Each Receipt this Period Total Code Tot	or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and address of any political committee	
FEC ID number of contributing federal political committee. Name of Employer (for Individual) NIKE Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ Other (specify) ▼ Primary Mailing Address 65799 N POWDER RIVER LN City NORTH POWDER Name of Employer (for Individual) Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ OR 97867 Date of Receipt Transaction ID: SA11AL494 Amount of Each Receipt this Period Transaction ID: SA11AL494 Amount of Each Receipt this Period CONTRIBUTION Aggregate Year-to-Date ▼ OR FEC ID number of contributing federal political committee. Name of Individual (Last, First, Middle Initial) or Full Organization Name The primary General of Individual (Last, First, Middle Initial) or Full Organization Name The primary General of Individual (Last, First, Middle Initial) or Full Organization Name The primary General of Individual (Last, First, Middle Initial) or Full Organization Name The primary General of Individual (Last, First, Middle Initial) or Full Organization Name The primary General of Individual (Last, First, Middle Initial) or Full Organization Name The primary General of Individual (Last, First, Middle Initial) or Full Organization Name The primary General of Individual (Last, First, Middle Initial) or Full Organization Name The primary General of Contributing (Coupation (for Individual)	Full Name of Individual (Last, First, Middle KNIGHT, PHILIP, , , Mailing Address 1 SW BOWERMAN DR City	Initial) or Full Organization Name State Zip Code	05 04 2020
Mailing Address 65799 N POWDER RIVER LN City NORTH POWDER FEC ID number of contributing federal political committee. Primary General Other (specify) ▼ City LEBANON Name of Employer (for Individual) FEC ID number of contributing federal political committee. C State Zip Code 97867 Aggregate Year-to-Date ▼ C Full Name of Individual (Last, First, Middle Initial) or Full Organization Name YOUNG, JAMES, , , Mailing Address PO BOX 97 City LEBANON FEC ID number of contributing federal political committee. C Name of Employer (for Individual) FEC ID number of contributing federal political committee. C Name of Employer (for Individual) FEC ID number of contributing federal political committee. C Aggregate Year-to-Date ▼ Name of Employer (for Individual) RETIRED Receipt For: Primary General Other (specify) Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Other (specify) Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Other (specify)	FEC ID number of contributing federal political committee. Name of Employer (for Individual) NIKE Receipt For: Primary General Other (specify)	Occupation (for Individual) CHAIRMAN EMERITUS Aggregate Year-to-Date ▼ 250000.00	150000.00 Memo Item
Date of Receipt Mailing Address PO BOX 97 City LEBANON FEC ID number of contributing federal political committee. Name of Employer (for Individual) RETIRED Receipt For: Primary Other (specify) Date of Receipt Mailing Address PO BOX 97 State Zip Code OR 97355 Transaction ID: SA11AI.4192 Amount of Each Receipt this Period Memo Item CONTRIBUTION CONTRIBUTION	Mailing Address 65799 N POWDER RIVER City NORTH POWDER FEC ID number of contributing federal political committee. Name of Employer (for Individual) Receipt For: Primary General	State Zip Code OR 97867 C Occupation (for Individual) Aggregate Year-to-Date	Transaction ID : SA11AI.4194 Amount of Each Receipt this Period Memo Item
SUBTOTAL of Receipts This Page (optional)	City LEBANON FEC ID number of contributing federal political committee. Name of Employer (for Individual) RETIRED Receipt For: Primary General	State Zip Code 97355 C Occupation (for Individual) RETIRED Aggregate Year-to-Date ▼	Transaction ID : SA11AI.4192 Amount of Each Receipt this Period 50000.00 Memo Item
TOTAL This Period (lost page this line number only)	SUBTOTAL of Receipts This Page (optional)	······	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	F	OR	LINE	NU	MBER	:	PAGE		7	OF	2	20
Use separate schedule(s)	(check only one)											
for each category of the Detailed Summary Page			11a		11b		11c		12			
., .,			13		14	×	15		16			17
not be sold or used by any person for the purpose of soliciting contributions ress of any political committee to solicit contributions from such committee.												

Any information copied from such Reports and Statements may or for commercial purposes, other than using the name and add NAME OF COMMITTEE (In Full) REPUBLICAN LEADERSHIP FOR OREGON Full Name of Individual (Last, First, Middle Initial) or Full Organization Name RED MAVERICK MEDIA LLC Date of Receipt Mailing Address 1426 N. 3RD STREET 2020 SUITE 310 80 City State Zip Code Transaction ID: SA15.4221 PA **HARRISBURG** 17102 Amount of Each Receipt this Period FEC ID number of contributing C 2157.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **VENDOR REFUND** Receipt For: Aggregate Year-to-Date ▼ Primary General 2157.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name В. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ General Primary Other (specify) 2157.00 SUBTOTAL of Receipts This Page (optional)..... 2157.00 TOTAL This Period (last page this line number only).....

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SCHEDULE B (FEC Form 3X)	Hee cana	rate schedule(s)	FOR LINE NUMBER: PAGE 8 OF 20					
ITEMIZED DISBURSEMENTS	for each of	category of the Summary Page	(check only 21b	one) 22 23 26 27				
	Detailed S	Julillaly Fage	28a	28b 28c 29 30b				
Any information copied from such Reports and Staten or for commercial purposes, other than using the name								
NAME OF COMMITTEE (In Full)								
REPUBLICAN LEADERSHIP FOR	OREGO	N						
Full Name (Last, First, Middle Initial)				Date of Dishursament				
A. ASCENT MEDIA LLC				Date of Disbursement				
Mailing Address 7600 E. EASTMAN AVENUE SUITE 405	05 07 2020							
City DENVER	State CO	Zip Code 80231		FEC Identification Number				
Purpose of Disbursement POLITICAL STRATEGY CONSULTING				C P C P C P C P C P C P C P C P C P C P				
Candidate Name			Category/	Transaction ID: SB21B.4206 Amount of Each Disbursement this Period				
Office Sought: House Disbursen	nent For:		Type	2000.00				
Senate President								
State: District:				Memo Item				
Full Name (Last, First, Middle Initial) B. DICKINSON WRIGHT, PLLC		Date of Disbursement						
Mailing Address 1825 EYE STREET, NW SUITE 900				05 01 2020				
City WASHINGTON	State DC	Zip Code 20006		FEC Identification Number				
Purpose of Disbursement LEGAL CONSULTING		<u> </u>		C Transaction ID - SPOAD 4466				
Candidate Name			Category/ Type	Transaction ID : SB21B.4166 Amount of Each Disbursement this Period				
Office Sought: House Disbursen	nent For: Primary	General		229.00				
	Other (spec			Memo Item				
Full Name (Last, First, Middle Initial) C. DICKINSON WRIGHT, PLLC				Date of Disbursement				
				M M / D D / Y Y Y				
Mailing Address 1825 EYE STREET, NW SUITE 900				05 12 2020				
City S WASHINGTON	State DC	Zip Code 20006		FEC Identification Number				
Purpose of Disbursement LEGAL CONSULTING				С				
Candidate Name	Category/ Type	Transaction ID: SB21B.4220 Amount of Each Disbursement this Period						
Office Sought: House Disbursen		2123.50						
President	Primary Other (spec	☐ General wify) ▼		Memo Item				
State: District:								
SUBTOTAL of Disbursements This Page (optional)				4352.50				
TOTAL This Period (last page this line number only)				, , , , , , , , , , ,				

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SCHEDULE B (FEC Form 3X)	Use sena	rate schedule(s)	FOR LINE NUMBER: PAGE 9 OF 20					
TEMIZED DISBURSEMENTS	for each	category of the Summary Page	(check only 21b 28a	one) 22 23 26 27 28b 28c 29 30b				
Any information copied from such Reports and State or for commercial purposes, other than using the nar								
NAME OF COMMITTEE (In Full) REPUBLICAN LEADERSHIP FOR	R OREGO	ON						
Full Name (Last, First, Middle Initial) A. DICKINSON WRIGHT, PLLC				Date of Disbursement				
Mailing Address 1825 EYE STREET, NW SUITE 900	06 02 2020							
WASHINGTON	State DC	Zip Code 20006		FEC Identification Number				
Purpose of Disbursement LEGAL CONSULTING Candidate Name		[Transaction ID : SB21B.4231				
Office Sought: House Disburse Senate	Category/ Type	Amount of Each Disbursement this Period 280.00						
State: President State:	Other (spec	cify) ▼		Memo Item				
Full Name (Last, First, Middle Initial) B. GUIDANT POLLING AND STRAT Mailing Address 4327 N NINES RIDGE LN		Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement Date of Disbursement						
BOISE Purpose of Disbursement	State ID	Zip Code 83702		FEC Identification Number				
POLLING Candidate Name			Category/ Type	Transaction ID : SB21B.4228 Amount of Each Disbursement this Period				
Office Sought: House Senate President State: District:	ment For: Primary Other (spec	General General	.,,,,	1000.00 Memo Item				
Full Name (Last, First, Middle Initial) LORI HARDWICK FUNDRAISING	, INC.			Date of Disbursement				
Mailing Address PO BOX 25445				05 01 2020				
City PORTLAND	State OR	Zip Code 97298		FEC Identification Number				
Purpose of Disbursement FUNDRAISING CONSULTING/SHIPPING Candidate Name	Category/ Type	Transaction ID: SB21B.4167 Amount of Each Disbursement this Period						
	ment For:			5103.44				

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SCHEDULE B (FEC Form 3X)			FOR LI	FOR LINE NUMBER: PAGE 10 OF 20					
ITEMIZED DISBURSEMENTS	LD DIODOILOLIVILIA for each category of the ' -			only one)	· _ /				
		Summary Page		8a 28k	, Н	28c	29	30b	
Any information copied from such Reports and State	nents mav	not be sold or use	ed by any p	erson for th	e purp	ose o	f solicitina	contributions	
or for commercial purposes, other than using the nar									
NAME OF COMMITTEE (In Full)									
$ \hspace{.05cm} angle$ REPUBLICAN LEADERSHIP FOR	OREG	ON							
Full Name (Last, First, Middle Initial)									
A. LORI HARDWICK FUNDRAISING	, INC.			Date	of Dis	burser	ment		
Mailing Address DO DOV 25445				O.5	M /	11		2020	
Mailing Address PO BOX 25445				Uc	,	11		2020	
,	State	Zip Code		FEC	Identifi	ication	Number		
PORTLAND Purpose of Disbursoment	OR	97298				-			
Purpose of Disbursement FUNDRAISING CONSULTING/SHIPPING									
Candidate Name			Category/				ID : SB21E	3.4217 ent this Period	
			Type	Amot		_acri L	Disbursein	CHI THIS I CHOO	
	ment For:							15099.28	
Senate President	Primary Other (spe	General							
State: District:	Other (spe	,city) \blacktriangledown		N	/lemo	item			
Full Name (Last, First, Middle Initial)									
B. LORI HARDWICK FUNDRAISING	, INC.			Date	of Dis	burser	ment		
Mailian Adduses DO DOV CT 447				M	M /	D 1		2000	
Mailing Address PO BOX 25445				0.5)	12		2020	
,	State	Zip Code		FEC	Identifi	ication	Number		
PORTLAND Purpose of Disbursement	OR	97298			-				
FUNDRAISING CONSULTING							0.0004		
Candidate Name			Category/				D: SB21E Disbursem	3.4218 ent this Period	
			Type		-			47000.00	
Office Sought: House Disburse	ment For: Primary	General						17000.00	
President	Other (spe			П.	Memo Item				
State: District:				L "	hemo	item			
Full Name (Last, First, Middle Initial)				Data	-4 D:-				
C. RIGHTSIDE COMPLIANCE LLC				Date	_	burser		YYY	
Mailing Address PO BOX 341027				05		12		2020	
01.	04-4-	7:- 0-1-							
City AUSTIN	State TX	Zip Code 78734		FEC	Identifi	cation	Number		
Purpose of Disbursement COMPLIANCE CONSULTING				С					
					ransa	ction l	ID : SB21I	B.4219	
Candidate Name			Category/ Type	Amou	ınt of l	Each [Disbursem	ent this Period	
Office Sought: House Disburse	ment For:		.,,,,					2520.00	
Senate	Primary	General					7		
President	Other (spe	ecify) 🔻		N	/lemo	ltem			
State: District:									
SUBTOTAL of Disbursements This Page (optional)				. [34619.28	
3 (1)				- #		,	7		
TOTAL This Period (last page this line number only)				_				

S 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purpose, other than using the name and address of any political committee to solicit contributions from such committee. ANAME OF COMMITTEE (In Full) REPUBLICAN LEADERSHIP FOR OREGON Full Name (Last, First, Middle Initial) A. RIGHTSIDE COMPLIANCE LLC Mailing Address PO BOX 341027 City AUSTIN Purpose of Disbursement COMPLIANCE CONSULTING Candidate Name Office Sought: House Disbursement For: Senate President State: District: Full Name (Last, First, Middle Initial) B. Mailing Address City State Disbursement Candidate Name Office Sought: House Disbursement Disbursement Candidate Name Category/ Type Transaction ID: SB21B.4230 Amount of Each Disbursement Candidate Name Category/ Type FEC Identification Number Category/ Type FEC Identification Number Category/ Type Office Sought: House Disbursement For: Senate President Candidate Name Office Sought: House Disbursement For: Senate President Sale: District: Full Name (Last, First, Middle Initial) Memo Item Memo Item Memo Item Memo Item Fell Name (Last, First, Middle Initial)	SCHEDULE B (FEC Form 3X)			FOR LINE	INE NUMBER: PAGE 11 OF 20					
Detailed Summary Page 280 280 280 280 300	ITEMIZED DISBURSEMENTS			I `						
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Pul) REPUBLICAN LEADERSHIP FOR OREGON Full Name (Last, First, Middle Initial) A. RIGHTSIDE COMPLIANCE LLC Mailing Address PO BOX 341027 City AUSTIN Purpose of Disbursement COMPLIANCE CONSULTING Candidate Name Office Sought: Full Name (Last, First, Middle Initial) B. Mailing Address City State Purpose of Disbursement Candidate Name Office Sought: Full Name (Last, First, Middle Initial) B. Mailing Address City State Disbursement For: Senate President State: District District Full Name (Last, First, Middle Initial) Date of Disbursement this Period Transaction ID: \$8218.4239 Amount of Each Disbursement this Period Transaction ID: \$8218.4239 Amount of Each Disbursement this Period Transaction ID: \$8218.4239 Amount of Each Disbursement this Period Transaction ID: \$8218.4239 Amount of Each Disbursement this Period Transaction ID: \$8218.4239 Amount of Each Disbursement this Period Transaction ID: \$8218.4239 Amount of Each Disbursement this Period Transaction ID: \$8218.4239 Amount of Each Disbursement this Period Transaction ID: \$8218.4239 Amount of Each Disbursement this Period Transaction ID: \$8218.4239 Amount of Each Disbursement this Period Transaction ID: \$8218.4239 Amount of Each Disbursement this Period Transaction ID: \$8218.4239 Amount of Each Disbursement this Period Transaction ID: \$8218.4239 Amount of Each Disbursement this Period Transaction ID: \$8218.4239 Amount of Each Disbursement this Period Transaction ID: \$8218.4239 Amount of Each Disbursement this Period Transaction ID: \$8218.4239 Transaction ID:										
NAME OF COMMITTEE (in Full) REPUBLICAN LEADERSHIP FOR OREGON Full Name (Last, First, Middle Initial) A. RIGHTSIDE COMPLIANCE LLC Mailing Address PO BOX 341027 City State Disbursement Tomospheric Disbursement For: Senate President Disbursement Candidate Name Cand	Anninformation period from such Demarks and Chate		not be cold on us							
REPUBLICAN LEADERSHIP FOR OREGON Full Name (Last, First, Middle Initial) A. RIGHTSIDE COMPLIANCE LLC Mailing Address PO BOX 341027 City AuSTIN CARDIANCE CONSULTING Candidate Name Cardegory' Office Sought: House Disbursement For: District: Dis										
A. RIGHTSIDE COMPLIANCE LLC Mailing Address PO BOX 341027 City AUSTIN Purpose of Disbursement COMPLIANCE CONSULTING Candidate Name Office Sought:	NAME OF COMMITTEE (In Full)									
A. RIGHTSIDE COMPLIANCE LLC Mailing Address PO BOX 341027 City AUSTIN TX TST34 Purpose of Disbursement COMPLIANCE CONSULTING Candidate Name Disbursement For: Senate President State: District: City State City State Disbursement Compliance City State Disbursement Candidate Name Category Type Disbursement District: Full Name (Last, First, Middle Initial) B. Mailing Address City Senate President State: District: Candidate Name Disbursement Candidate Name Category Amount of Each Disbursement Candidate Name Category Amount of Each Disbursement this Period FEC Identification Number Candidate Name Category Amount of Each Disbursement this Period FEC Identification Number Category Amount of Each Disbursement this Period Type Type Type Disbursement Category Amount of Each Disbursement this Period Type	$ \; angle$ REPUBLICAN LEADERSHIP FOF	R OREG	ON							
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City					M = M	/ D	D / Y	Y Y Y		
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Candidate Name Category/ Office Sought:	•		l '		FEC Id	entification	n Number			
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Office Sought: House Senate President Disbursement For: State: District: Other (specify) V B. State: District: District: District: Disbursement For: Senate President District:					Tra	nsaction	ID : SB21B.4	4230		
Office Sought:	Candidate Name				Amount	of Each	Disbursemer	it this Period		
State: District:	Office Sought: House Disburse	ment For:		Турс	- "			2530.00		
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B. Date of Disbursement		Other (spe	ecify) 🔻		Me	mo Item				
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City Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ State: District: State Zip Code FEC Identification Number Category/ Type Amount of Each Disbursement this Period Memo Item					M M	/ D	D / Y	Y Y Y		
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Memo Item	Mailing Address					حا ا				
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Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ State: District: Memo Item					FEC 10	entification	1 Number	-		
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Senate President Other (specify) ▼ State: District: Primary General Other (specify) ▼ Memo Item					Amount	OI Lacii	Disbuisemen	it tills Fellou		
State: Other (specify) ▼ Memo Item		1] L	-		4		
State: District: Memo Item										
		Other (spe	= Ciiy) ▼		Me	mo Item				
SURTOTAL of Dishursements This Page (optional)					<u> </u>					
COSTOTILE OF SIGNATURE THIS Tago (optional)	SUBTOTAL of Disbursements This Page (optional).							2530.00		
TOTAL This Period (last page this line number only).	TOTAL This Deviced (leak seems this live seems)	-			-			47885.22		

S 17

SCHEDULE B (FEC Form 3X)			FOR LIN	INE NUMBER: PAGE 12 OF 20				
ITEMIZED DISBURSEMENTS		parate schedule(s) category of the	(check or	y one)				
		Summary Page	21					
[28					
Any information copied from such Reports and State or for commercial purposes, other than using the na								
NAME OF COMMITTEE (In Full)								
REPUBLICAN LEADERSHIP FOR	R OREG	ON						
Full Name (Last, First, Middle Initial)								
A. LINES FOR LIFE				Date of Disbursement				
Mailing Address 5100 SW MACADAM AVENUE STE. 400				06 02 2020				
City PORTLAND	State OR	Zip Code 97239		FEC Identification Number				
Purpose of Disbursement		0.200		C				
CHARITABLE DONATION				Transaction ID : SB29.4233				
Candidate Name			Category/	Amount of Each Disbursement this Period				
Office Sought: House Disburse	ement For:		Туре	1060.28				
Senate	Primary	General		7 7				
President State: District:	Other (spe	ecify) ▼		Memo Item				
Full Name (Last, First, Middle Initial)				_				
B.				Date of Disbursement				
				M M / D D / Y Y Y Y				
Mailing Address								
City	State	Zip Code		FEC Identification Number				
Purpose of Disbursement				C				
Candidate Name			Category/	Amount of Each Disbursement this Period				
Office Sought: House Disburse	ement For:		Type					
Senate	Primary	General		4 4				
President	Other (spe	ecify)		Memo Item				
State: District: Full Name (Last, First, Middle Initial)								
C.				Date of Disbursement				
Mailing Address				M = M / D = D / Y = Y = Y				
Mailing Address								
City	State	Zip Code		FEC Identification Number				
Purpose of Disbursement				C				
One Udaha Nama								
Candidate Name			Category/ Type	Amount of Each Disbursement this Period				
Office Sought: House Disburse	ement For:) F -					
Senate	Primary	General						
State: District:	Other (spe	ecity) 🔻		Memo Item				
State. District.								
SUBTOTAL of Disbursements This Page (optional).				1060.28				
TOTAL This Period (last page this line number only	٨			1060.28				

TEMIZED INDEPENDENT EXPENDITURES				PAGE 13 OF 20
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
REPUBLICAN LEADERSHIP FOR O	REGON			DENTIFICATION NUMBER ▼
			C	C00737361
Check if 24-hour report 48-hour report	New repo	ort Amends report	filed on M M M	/ D D / Y Y Y Y
Full Name of Payee ASCENT MEDIA LLC		☐ Memo It	em Date of Publ	ic Distribution/Dissemination
Mailing Address 7600 E. EASTMAN AVENUE			05	08 2020
SUITE 405			Amount	
City	State	Zip Code		4750.00
DENVER	со	80231		ID: SE.4202 ursement or Obligation
Purpose of Expenditure TV MEDIA PRODUCTION		Category/ Type 004	05	07 2020
Name of Federal Candidate:		Support	Office Sought:	✗ House District:02
BENTZ, CLIFF, , ,		X Oppose	President	Senate State: OR
Calendar Year-To-Date Per Election for Office Sought	7	311489.00	Disbursement For:	▼ Primary General specify) ▶
Full Name of Payee ASCENT MEDIA LLC		☐ Memo It	em Date of Publ	ic Distribution/Dissemination
Mailing Address 7600 E. EASTMAN AVENUE SUITE 405			Amount	2020
City	State	Zip Code		4750.00
DENVER	СО	80231	Transaction	ID: SE.4203 ursement or Obligation
Purpose of Expenditure TV MEDIA PRODUCTION	1	Category/ Type 004	05	07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:	₩ House District: 02
ATKINSON, JASON, , ,		x Oppose	President	Senate State: OR
Calendar Year-To-Date Per Election for Office Sought	7	040000 00	Disbursement For: 2020 Other (s	x Primary General pecify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	i		•	9500.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		>	7
(c) TOTAL Independent Expenditures			>	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
HOBBS, CABELL, , ,	[Electronically File	[ed] Date	M M / D D D	2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 14 OF 20 FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼			
REPUBLICAN LEADERSHIP FOR O	REGON			C C00737361			
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D D / Y Y Y Y			
Full Name of Payee ASCENT MEDIA LLC		☐ Memo	Item Date of	f Public Distribution/Dissemination			
ASCENT WEDIA LEC				05			
Mailing Address 7600 E. EASTMAN AVENUE			Amour	nt			
SUITE 405	1.5	1					
City	State	Zip Code	Trans	4750.00			
DENVER	СО	80231	Date o	action ID : SE.4204 f Disbursement or Obligation			
Purpose of Expenditure TV MEDIA PRODUCTION		Category/ Type 004		05			
Name of Federal Candidate:		X Support	Office Sough	t: K House District: 02			
BUEHLER, KNUTE, , ,		Oppose	Preside	ent Senate State: OR			
Calendar Year-To-Date			Disbursement	For: Primary General			
Per Election for Office Sought	7-1-1-7	320989.00	2020 O	ther (specify) ▶			
Full Name of Payee		☐ Memo	Item Date of	f Public Distribution/Dissemination			
ASCENT MEDIA LLC			М	05 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 7600 E. EASTMAN AVENUE				30 30 2020			
SUITE 405			Amour	ıt			
City	State	Zip Code		4750.00			
DENVER	СО	80231		action ID : SE.4205 f Disbursement or Obligation			
Purpose of Expenditure TV MEDIA PRODUCTION		Category/ 004	М				
TV III.ZBIVAT KOBOOTION		Type 004		00 07 2020			
Name of Federal Candidate:		🗶 Support	Office Sough	t: Nouse District: 02			
BUEHLER, KNUTE, , ,		Oppose	Preside	ent Senate State: OR			
Calendar Year-To-Date		325739.00	Disbursement	For: Primary General			
Per Election for Office Sought	7 7	020100.00	2020 O	ther (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures				9500.00			
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•				
(c) TOTAL Independent Expenditures			•				
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized						
HOBBS, CABELL, , ,	[Electronically Fil	[ed]	M = M /	30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Signature		Date	. 06	2020			

				FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼			
REPUBLICAN LEADERSHIP FOR OF	REGON						
				C C00737361			
Check if 24-hour report 48-hour report	New repo	ort Amends rep	ort filed	on M M / D D / Y Y Y Y			
Full Name of Payee MEDIUM BUYING LLC		☐ Memo	Item	Date of Public Distribution/Dissemination			
				05 / 08 / Y Y Y Y Y Y			
Mailing Address 815 GRANDVIEW AVENUE				Amount			
SUITE 600							
City	State	Zip Code		39063.00			
COLUMBUS	ОН	43215		Transaction ID : SE.4185 Date of Disbursement or Obligation			
Purpose of Expenditure TV MEDIA PLACEMENT		Category/ Type 00	4	05 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate:		✗ Support	Office	e Sought: X House District: 02			
BUEHLER, KNUTE, , ,		Oppose		President Senate State: OR			
Calendar Year-To-Date Per Election for Office Sought	7	202305.00	Disbu 2020	orsement For: Primary General Other (specify) ▶			
Full Name of Payee		Memo	Item	Date of Public Distribution/Dissemination			
MEDIUM BÚYING LLC				M M / D D / Y Y Y Y			
Mailing Address 815 GRANDVIEW AVENUE				05 08 2020			
SUITE 600				Amount			
City	State	Zip Code		39063.00			
COLUMBUS OH 43215				Transaction ID : SE.4189 Date of Disbursement or Obligation			
Purpose of Expenditure TV MEDIA PLACEMENT	1	Category/	4	05 07 2020			
		Type 002		00 01 2020			
Name of Federal Candidate:		Support	Office	e Sought: House District: 02			
ATKINSON, JASON, , ,		x Oppose		President Senate State: OR			
Calendar Year-To-Date		241368.00	Disbu 2020	rrsement For: 🗶 Primary General			
Per Election for Office Sought	7 7		2020	Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures			▶	78126.00			
(b) SUBTOTAL of Unitemized Independent Expenditur	200						
(b) 000101742 of officeringod masperiality Experiality	00						
(c) TOTAL Independent Expenditures			•				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized						
HOBBS, CABELL, , ,	Electronically Fil	edl -	М	M / D D / Y Y Y Y			
Signature		Dat	te 0	6 30 2020			

TEMIZED INDEPENDENT EXPENDITURES				PAGE 16 OF 20 FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼			
REPUBLICAN LEADERSHIP FOR OF	REGON			C C00737361			
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y			
Full Name of Payee MEDIUM BUYING LLC		☐ Memo	Item Dat	e of Public Distribution/Dissemination			
WEDIOW BOTING LEC				05 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 815 GRANDVIEW AVENUE			Am	Amount			
SUITE 600	Ctoto	Zin Codo	— г	22695 50			
City	State	Zip Code 43215	Tro	32685.50 Transaction ID : SE.4190			
COLUMBUS	ОН	43213		e of Disbursement or Obligation			
Purpose of Expenditure TV MEDIA PLACEMENT		Category/ Type 004		05 / 07 / 2020			
Name of Federal Candidate:		✗ Support	Office Sou	ught: X House District: 02			
BUEHLER, KNUTE, , ,		Oppose	Pres	sident Senate State: OR			
Calendar Year-To-Date			Disbursem	nent For: 🗶 Primary General			
Per Election for Office Sought	7	274053.50	2020	Other (specify) ▶			
Full Name of Payee		Memo	Item Dat	e of Public Distribution/Dissemination			
Full Name of Payee MEDIUM BUYING LLC				M M / D D / Y Y Y			
Mailing Address				05 08 2020			
815 GRAINDVIEW AVENUE				ount			
SUITE 600 City	State	Zip Code	— г	32685.50			
COLUMBUS	ОН	43215		Transaction ID : SE.4191 Date of Disbursement or Obligation			
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y			
TV MEDIA PLACEMENT		Type 004		05 07 2020			
Name of Federal Candidate:		Support	Office Sou	ught: Mouse District:02			
BENTZ, CLIFF, , ,		x Oppose	Pres	sident Senate State: OR			
Calendar Year-To-Date		200720 00	Disbursem	nent For: 🗶 Primary General			
Per Election for Office Sought	7-1-1-7-	306739.00	2020	Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures			• <u></u>	65371.00			
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•				
(c) TOTAL Independent Expenditures			•				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized						
HOBBS, CABELL, , ,	Flactronicalla F21	ad1	M = M	/ D D / Y Y Y Y Y			
Signature	Electronically File	eaj Date	9 06	30 2020			

SCHEDULE E (FEC FORM 3X) TEMIZED INDEPENDENT EXPENDITURES	;			PAGE 17 OF 20
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
REPUBLICAN LEADERSHIP FOR O	REGON			FEC IDENTIFICATION NUMBER ▼
				C C00737361
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed	on M M / D D / Y Y Y Y
Full Name of Payee MEDIUM BUYING LLC		☐ Memo	Item	Date of Public Distribution/Dissemination M M / D J D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 815 GRANDVIEW AVENUE				2020
SUITE 600				Amount
City	State	Zip Code		3500.00
COLUMBUS	ОН	43215		Transaction ID : SE.4222 Date of Disbursement or Obligation
Purpose of Expenditure TV MEDIA PLACEMENT		Category/ Type 004		05 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	e Sought: House District: 02
BENTZ, CLIFF, , ,		X Oppose		President Senate State: OR
Calendar Year-To-Date Per Election for Office Sought	7 7	339229.00	Disbu 2020	ursement For: Primary General Other (specify) ▶
Full Name of Payee MEDIUM BUYING LLC		☐ Memo	Item	Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 815 GRANDVIEW AVENUE SUITE 600				Amount
City	State	Zip Code		3500.00
COLUMBUS	ОН	43215		Transaction ID : SE.4223 Date of Disbursement or Obligation
Purpose of Expenditure TV MEDIA PLACEMENT		Category/ Type 004		05 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office	e Sought: House District: 02
BUEHLER, KNUTE, , ,		Oppose		President Senate State: OR
Calendar Year-To-Date Per Election for Office Sought	7 7	342729.00	Disbu 2020	ursement For: x Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	3		. •	7000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			
HOBBS, CABELL, , ,	[Electronically Fil	[ed] Date	e 0	6 30 2020

Date

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 18 OF 20 FOR LINE 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼			
REPUBLICAN LEADERSHIP FOR OI	REGON			C C00737361			
				M = M / D = D / Y = Y = Y			
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on				
Full Name of Payee RED MAVERICK MEDIA LLC		☐ Memo	Item Da	te of Public Distribution/Dissemination			
				05			
Mailing Address 1426 N. 3RD STREET	Am	nount					
SUITE 310 City	State	Zip Code	— г	6978.50			
HARRISBURG	PA	17102	Tra	Transaction ID : SE.4168			
Purpose of Expenditure		Catanani	Da	te of Disbursement or Obligation			
PRINTING/POSTAGE		Category/ Type 004	1	05 01 2020			
Name of Federal Candidate:		x Support	Office So	ught: House District: 02			
BUEHLER, KNUTE, , ,		Oppose	Pre	sident Senate State: OR			
Calendar Year-To-Date Per Election for Office Sought		142040.50	Disburser 2020	1			
Full Name of Payee	1	□ M		Other (specify) ▶te of Public Distribution/Dissemination			
RED MAVERICK MEDIA LLC		∐ Memo	item Da	M M / D D / Y Y Y Y			
Mailing Address				05 06 2020			
1426 N. 3RD STREET SUITE 310			Am	nount			
City	State	Zip Code		6978.50			
HARRISBURG PA 17102				Transaction ID : SE.4170 Date of Disbursement or Obligation			
Purpose of Expenditure PRINTING/POSTAGE	•	Category/ 004		05 01 2020			
11		Type 004		03 01 2020			
Name of Federal Candidate:		Support	Office So	•			
CRUMPACKER, JIMMY, , ,		x Oppose	Pre	sident Senate State: OR			
Calendar Year-To-Date Per Election for Office Sought		149019.00	Disburser 2020	nent For: 🗶 Primary 🔲 General			
Total Elocation for Called Googna	1			Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures				13957.00			
(a) SUBTUTAL OF Itemized independent Expenditures	•••••		•	13937.00			
(b) SUBTOTAL of Unitemized Independent Expenditure	es						
(c) TOTAL Independent Expenditures			• •				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized						
HOBBS, CABELL, , ,	Electronically Fil	led1 –	M = M	/ D D / Y Y Y Y Y			
Signature		Date	€ 06	30 2020			

TEMIZED INDEPENDENT EXPENDITURES			PAGE 19	OF 20
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION	4 OF FORM 3X
REPUBLICAN LEADERSHIP FOR OI	REGON			IN NUMBER V
			C C00737361	
Check if 24-hour report 48-hour report	New repo	ort Amends report	filed on M M / D D /	Y
Full Name of Payee RED MAVERICK MEDIA LLC		☐ Memo It	M M / D D /	Y Y Y Y Y
Mailing Address 1426 N. 3RD STREET			05 07	2020
SUITE 310			Amount	
City	State	Zip Code		7111.50
HARRISBURG	PA	17102	Transaction ID : SE.4178 Date of Disbursement or O	bligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type 004	05 05 / 05 /	y y y y y 2020
Name of Federal Candidate:		✗ Support	Office Sought: 🗶 House I	District: 02
BUEHLER, KNUTE, , ,		Oppose	President Senate	State: OR
Calendar Year-To-Date Per Election for Office Sought	4		Disbursement For: Other (specify) ▶	
Full Name of Payee RED MAVERICK MEDIA LLC Mailing Address 1426 N. 3RD STREET SUITE 310		☐ Memo It	Date of Public Distribution/I	Dissemination 2020
City	State	Zip Code		7111.50
HARRISBURG	PA	17102	Transaction ID : SE.4179 Date of Disbursement or O	bligation
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type 004	05 / D D /	2020
Name of Federal Candidate:		Support	Office Sought: X House I	District: 02
BENTZ, CLIFF, , ,		x Oppose	President Senate	State: OR
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	163242.00	Disbursement For: ✓ Primary 2020 Other (specify) ✓	General
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure (c) TOTAL Independent Expenditures	es		 	14223.00
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
HOBBS, CABELL, , ,	Electronically Fil	[ed] Date	06 30 / Y Y 2020	

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				Ī	PAGE 20	OF 20
			·	I	FOR LINE	24 OF FORM 3X
NAME OF COMMITTEE (In Full)	DECON			FEC ID	ENTIFICAT	ION NUMBER ▼
REPUBLICAN LEADERSHIP FOR OF	REGUN			С	C0073736	1
Check if 24-hour report 48-hour report	New repo	ort Amends repor	t filed on	M /	D D /	Y Y Y Y Y
Full Name of Payee RED MAVERICK MEDIA LLC		☐ Memo I		of Public	Distribution	n/Dissemination
Mailing Address 1426 N. 3RD STREET			_ L	05	08	2020
SUITE 310			Amour	nt		
City	State	Zip Code	$\dashv \vdash$			4995.00
HARRISBURG	PA	17102			D: SE.4207 sement or	
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type 004	M	05 /	07	2020
Name of Federal Candidate:		Support	Office Sough	t: X	House	District:02
BENTZ, CLIFF, , ,		X Oppose	Preside		Senate	State: OR
Calendar Year-To-Date			Disbursemen		x Prima	
Per Election for Office Sought	7	330734.00	2020	ther (spe		, Constan
Full Name of Payee		☐ Memo I	tem Date of	of Public	Distribution	n/Dissemination
RED MAVERICK MEDIA LLC			M	05 /	08	2020
Mailing Address 1426 N. 3RD STREET						
SUITE 310			Amour	nt		
City	State	Zip Code	⊣ Γ:			4995.00
HARRISBURG	PA	17102	Trans	action I	D: SE.420 sement or	3
Purpose of Expenditure PRINTING/POSTAGE		Category/ Type 004	M	05 ^M	07	2020
Name of Federal Candidate:		✗ Support	Office Sough	t: 🗶	House	District: 02
BUEHLER, KNUTE, , ,		Oppose	Preside		Senate	State: OR
Calendar Year-To-Date			Disbursemen	t For:	x Prima	y General
Per Election for Office Sought	7 7	335729.00	²⁰²⁰	ther (spe	ecify) ►	
(a) SUBTOTAL of Itemized Independent Expenditures			-	-		9990.00
			_			
(b) SUBTOTAL of Unitemized Independent Expenditur	es		•	7		
(c) TOTAL Independent Expenditures			•	- 7		207667.00
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized					
HOBBS, CABELL, , ,	Electronically Fil	ed] Date	M M / / 06	30		20
0	-	_ Date	00	55	20	